

09/720017

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected  
= ..... Allowed  
- ..... Canceled  
+ ..... Restricted  
N ..... Non-elected  
I ..... Interference  
A ..... Appeal  
O ..... Objected

Claim	Date
Final	
Original	
1	8-9-02
2	5-2-03
3	5-2-03
4	5-2-03
5	5-2-03
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8	5-2-03
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50	5-2-03

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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